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**\*BIBDATASHEET\***

CONFIRMATION NO. 4624

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/649,067	<b>FILING OR 371(c) DATE</b> 08/27/2003 <b>RULE</b>	<b>CLASS</b> 326	<b>GROUP ART UNIT</b> 2819	<b>ATTORNEY DOCKET NO.</b> 42P14037D2
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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a DIV of 10/109,826 03/29/2002 PAT 6,732,203  
 which claims benefit of 60/280,800 04/02/2001  
 and is a CIP of 09/494,608 01/31/2000 PAT 6,446,195  
 and is a CIP of 09/652,100 08/30/2000 PAT 6,408,376  
 and is a CIP of 09/652,593 08/30/2000 PAT 6,832,306  
 and is a CIP of 09/652,556 08/31/2000 PAT 6,557,096  
 and is a CIP of 09/494,609 01/31/2000 PAT 6,598,155  
 and is a CIP of 10/056,393 01/24/2002 PAT 7,111,190  
 which claims benefit of 60/271,139 02/23/2001  
 and said 10/109,826 03/29/2002  
 is a CIP of 10/076,966 02/15/2002 PAT 6,944,087  
 which claims benefit of 60/271,279 02/24/2001  
 and said 10/109,826 03/29/2002  
 is a CIP of 10/047,538 01/14/2002 PAT 6,618,313  
 which claims benefit of 60/271,282 02/23/2001

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 11/19/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 58	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

**ADDRESS**

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**TITLE**

BUS STATE KEEPERS

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